



Michael R. Pence, Governor
State of Indiana

Division of Disability and Rehabilitative Services
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To: Division of Disability and Rehabilitative Services participants, providers, families and stakeholders
From: Kylee Hope, Director, Division of Disability and Rehabilitative Services
Re: Family Supports (FSW) and Community Integration and Habilitation (CIH) Waiver rate increase amendments
Date: September 22, 2016

On April 13, 2016, the Indiana Family and Social Service Administration (FSSA) Division of Disability and Rehabilitative Services (DDRS) announced its intent to submit proposed amendments to the Community Integration and Habilitation (CIH) Waiver and the Family Support Waiver (FSW) to the Centers for Medicare and Medicaid Services (CMS) for consideration. The waiver amendments were available for review and public comment on the DDRS Draft Policies for Public Comment Web page from April 13, 2016, through May 12, 2016. The amendments include information regarding provider rate increases.

Pursuant to legislative mandate, Indiana House Enrolled Act 1001, effective July 1, 2015 - section 137, page 169, a 2.5 percent rate increase for providers, which may impact waiver participants' overall amount of services, was scheduled for the following services:

Family Supports Waiver – IN.0387.R03.02:

- Community Based Habilitation – Individual
- Facility Based Habilitation – Individual
- Respite

Community Based Integration and Habilitation Waiver – IN.0378.R03.03:

- Community Based Habilitation – Individual
- Residential Habilitation & Supports (Hourly & Daily)
- Facility Based Habilitation – Individual
- Respite

The CIH waiver case management service was scheduled to incur a 5 percent rate increase, which will not have any impact to participants' budget allocation.

DDRS is pleased to announce the approval of the amendments by CMS with effective dates of September 1, 2016.

As always, participants and their teams can choose to revisit their budget or current plan of services to determine if specific changes need to be made based on the rate increases to ensure that they continue to receive the necessary home and community based support services.

